IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MARYLAND USDC- GREENBELT '24 MAR 13 PM3:28

SAEED PARKER	Complaint for a Civil Case	
(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs	Case No. PX 24 CV 07 49 (to be filled in by the Clerk's Office)	
cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)	Jury Trial: ☐ Yes ☐ No (check one)	
-against-	Rcv'd by:	
GENEVIEUE DIAMOND		

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional

page with the full list of names.)

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	SAEED PARKER
Street Address	5440 MARINELLI RD APT142
City and County	N. BETHESDA, MONTGOMERY
State and Zip Cod	
Telephone Number	
E-mail Address	SAEED - PARKER 1333 @ GMAIL . COM
Dofondant(s)	1333

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	GENEVIEVE DIAMOND
Job or Title	SOCIAL WORKER
(if known)	
Street Address	7300 CALHOUN PLACE, SUITE 400
City and County	ROCKVILLE, MONTGOMERY
State and Zip Code	MD 20855
Telephone Number	
E-mail Address	GOKREBS@MONTGOMERY
(if known)	GDENERS
	COUNTYMD. GOV

Defendant No. 2	
Name	
Job or Title	
(if known)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address	
(if known)	
D. C. J. A.M. 2	
Defendant No. 3	
Name	
Job or Title	
(if known)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address	
(if known)	
Defendant No. 4	
Name	
Job or Title	
(if known)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address	
(if known)	
(If there are more than for	ur defendants, attach an additional page

(If there are more than four defendants, attach an additional page providing the same information for each additional defendant.)

II. Basis for Jurisdiction

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What i	is the b	asis for	federal court jurisdiction?	(check all that apply)	
6	⊼ Fed	leral que	estion	☐ Diversity of citize	enship
Fill ou	t the pa	aragraph	ns in this section that apply	to this case.	
A.	If the	Basis f	or Jurisdiction Is a Fede	ral Question	
	States	Consti	fic federal statutes, federal tution that are at issue in the	nis case.	
	STATUTE OF LIMITATION RULE 5-101				E 5-101
В.	If the		or Jurisdiction Is Diversi	ty of Citizenship	
		a.	If the plaintiff is an indiv	ridual	
			The plaintiff, (name) the State of (name)		
		b.	If the plaintiff is a corpor	ation	
			The plaintiff, (name)under the laws of the Sta and has its principal plac	te of (<i>name</i>)	,
		(If mo	re than one plaintiff is nan	ned in the complaint, at	tach an additional

page providing the same information for each additional plaintiff.)

Th	e Defendant(s)		
a.	If the defendant is an individual		
	The defendant, (name), is a citizen of		
	the State of (name) Or is a citizen of		
	(foreign nation)		
b.	If the defendant is a corporation		
	The defendant, (name), is		
	incorporated under the laws of the State of (name)		
	, and has its principal place of		
	business in the State of (name) Or is		
	incorporated under the laws of (foreign nation)		
	, and has its principal place of		
	business in (name)		
(If	more than one defendant is named in the complaint, attach an		
	ditional page providing the same information for each additional fendant.)		
vve)			
Th	e Amount in Controversy		
	amount in controversy—the amount the plaintiff claims the defendant		
	ves or the amount at stake—is more than \$75,000, not counting interest d costs of court, because (explain):		

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages. For any request for injunctive relief, explain why monetary damages at a later time would not adequately compensate you for the injuries you sustained, are sustaining, or will sustain as a result of the events described above, or why such compensation could not be measured.

J DID NOT PHYSICALLY DAMAGE BUT WORSE THAN THAT IWAS DAMAGED MENTALLY WHEN THEY KEPT MY SON, DAVEHTER IN LAW AND GRANDSON IN THEIR OFFICE AND SIXHOURS AND THEN FORCES THEM TO INTERROGATE MY GRANDSON AT AGE 7 YEARS OLD WITHOUT HIS PARENTS ON 2114, 2020. MY ANXIETY AND DEPRESSION STARTED WHEN MY SON TOLD ME WHAT HAPPENED TO THEM. IT CONTINUE ALL YEAR UNTIL TODAY WHEN 9 FOUND THEY ACCUSED ME WITH A FAKE DOCUMENT. AFTER THAT 9 TRIED TO REDEEM MYSELF BUT S SAW ALL THE JUSTICE PEPARTMENTS TRYING TO COVER THIS CRIMINAL ACT. AS ATTACHED YOU CAN SEE TWO LETTERS & HAVE SENT TO THEM AND THEY NEVER ANS WER. THIS COMPENSA. ION SMALL AMOUNT THAT SHE DID TOME AND MY FAMILY SPECIALLY TO MY GKAND SON BECAUSE AFTER THAT INTERROGATE HE SLEPT WITH PARENTS MORE ONE MONTH BECAUSE HE SO SCAKED.

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where caserelated papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Date of signing: 3/13, 20 2.4	
	Signature of Plaintiff Printed Name of Plaintiff SAEED PAR	KER
	(If more than one plaintiff is named in the complaint, certification and signature page for each additional p	
В.	For Attorneys	
	Date of signing:, 20	
	Signature of Attorney Printed Name of Attorney Bar Number Name of Law Firm Address Telephone Number Email Address	